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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/630,024			ing Date 31/2000	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
FOR			NUMBER FI	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A			N/A	690	
SEARCH FEE (37 CFR 1.16(k), (f), or (m))			N/A		N/A		N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A]	N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 = *				x s =		OR	x \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 = *]	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$	If the specification and drawings exc sheets of paper, the application size is \$250 (\$125 for small entity) for ea additional 50 sheets or fraction there 35 U.S.C. 41(a)(1)(G) and 37 CFR 1									
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL	690	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	07/20/2009	CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 24	Minus	36	= 0]	x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	• 4	Minus	 5	= 0]	x \$ =		OR	X \$220=	0	
ME	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMEN	-	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())	*	Minus	**	=]	x \$ =		OR	x s =		
Σ	Independent (37 CFR 1.16(h))		Minus	***	=]	x \$ =		OR	x \$ =		
Π	Application Size Fee (37 CFR 1.16(s))					1			1			
Α	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR			
* If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	TOTAL ADD'L FEE		
** If	If the entiry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". TAMMY MCBETH BROWN/ "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".											

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